

Experimental and investigational services

We provide coverage for this procedure for adult members who meet medical necessity criteria. Submit authorization requests through the e-referral system.

The submitter will receive a prompt to complete a questionnaire to determine the appropriateness of the requested service. The questions are listed below.

The e-referral system will pend the case. If needed, we will contact the provider for additional clinical information. Authorization is not a guarantee of payment.

Payment is based on established claim edits. We may retrospectively monitor compliance with authorization requirements.

Applicable procedure codes: Codes that are configured as experimental and investigational in our systems.

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See below for the questions you'll encounter in the e-referral system.

Q What service or treatment are you requesting for the patient? Be specific and provide as much detail as possible.

A



**Blue Care
Network
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Preview questionnaire
Experimental and investigational services
For Blue Care Network commercial and BCN AdvantageSM

Effective June 27, 2021

Q What is the patient's diagnosis or suspected diagnosis?

A

Q What is the patient's past medical and surgical history? Be specific and provide as much detail as possible.

A

Q What previous treatment has the patient had for this condition? Be specific and provide as much detail as possible.

A



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Q What was the patient's response to the previous treatment?

A

Q Has a specialist treated the patient for this condition? Include the specialist's name, address, phone number, specialty type and pertinent findings in the Case Communication field.

A

Possible answers: Yes No N/A